

SEP 15 2005

**CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. §1.8**

I hereby certify that this correspondence, totaling 2 pages including recited attachments, is being facsimile transmitted to the United States Patent and Trademark Office at facsimile no.: 571-273-8300 (Central number) on the below date:

Date: September 15, 2005 Name: David W. Okey Signature: *D.W. Okey*

**BRINKS  
HOFER  
GILSON  
& LIONE**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Appln. of: Michael L. Imundo et al.  
 Appln. No.: 09/853,945  
 Filed: May 11, 2001  
 For: Process for Repairing a Structure

Examiner: Jermie E. Cozart  
 Art Unit: 3726

Attorney Docket No: 10420/15

Mall Stop AF  
 Commissioner for Patents  
 P. O. Box 1450  
 Alexandria, VA 22313-1450

**TRANSMITTAL**

**Attached is/are:**

- Notice of Appeal
- Return Receipt Postcard

**Fee calculation:**

- No additional fee is required.
- Small Entity.
- An extension fee in an amount of \$\_\_\_\_\_ for a \_\_\_\_\_-month extension of time under 37 C.F.R. § 1.136(a).
- A petition or processing fee in an amount of \$\_\_\_\_\_ under 37 C.F.R. § 1.17(\_\_\_\_\_).
- An additional filing fee has been calculated as shown below:

				Small Entity		Not a Small Entity			
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total		Minus			x \$25=			x \$50=	
Indep.		Minus			x 100=			x \$200=	
First Presentation of Multiple Dep. Claim					+ \$180=			+ \$380=	
					Total	\$		Total	\$

**Fee payment:**

- A check in the amount of \$\_\_\_\_\_ is enclosed.
- Please charge Deposit Account No. 23-1925 in the amount of \$\_\_\_\_\_ . A copy of this Transmittal is enclosed for this purpose.
- Payment by credit card in the amount of \$\_\_\_\_\_ (Form PTO-2038 is attached).
- The Director is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this paper (including any extension fee required to ensure that this paper is timely filed), or to credit any overpayment, to Deposit Account No. 23-1925.

Sept 15, 2005  
 Date

Respectfully submitted,  
*D.W. Okey*  
 David W. Okey (Reg. No. 42,959)

RECEIVED  
CENTRAL FAX CENTER

SEP 15 2005

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) 10420/15	
I hereby certify that this correspondence is being sent via facsimile to 1-571-273-8300 to the United States Patent and Trademark Office, to the Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450		In re Application of Michael L. Imundo et al.	
On <u>September 15, 2005</u>		Application Number 09/853,945	Filed <u>May 11, 2001</u>
Signature <u><i>David W. Okey</i></u>		For Process for Repairing a Structure	
Typed or printed Name <u>David W. Okey, Regis. No. 42,959</u>		Art Unit 3726	Examiner Jermie E. Cozart
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner, in an Office Action mailed June 15, 2005.			
<input checked="" type="checkbox"/> No fee is due since the fee for this Notice of Appeal has already been paid in a previously filed Notice of Appeal (37 CFR 41.20(b)(1)). <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is \$_____ Reduced by half, and the resulting fee is : _____ <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>23-1925</u> . <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>			
I am the		<u><i>David W. Okey</i></u>	
<input type="checkbox"/> applicant/inventor.		Signature	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		<u>David W. Okey</u>	
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>42,959</u>		Typed or Printed Name	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		<u>312-321-4200</u>	
		Telephone number	
		<u>September 15, 2005</u>	
		Date	